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Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	476-1471	Total Pages	
First Named Inventor or Application Identifier			
Phillips			
Express Mail Label No.		EM 394 992 314 US	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 202311. ☒ Fee Transmittal Form2. ☒ Specification [Total Pages 11]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

6. ☐ Microfiche Computer Program (Appendix)
(Submit an original, and a duplicate for fee processing)7. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

3. ☒ Drawing(s) (35 USC 113) [Total Sheets 4]

4. Oath or Declaration [Total Sheets]

- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))
for continuation /divisional with Box 17 completed)
[Note Box 5 below]
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b).

5. ☐ Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ACCOMPANYING APPLICATION PARTS

- 8. Assignment Papers (cover sheet & document(s))
- 9. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
- 10. ☐ English Translation Document (if applicable)
- 11. Information Disclosure Copies of IDS
Statement (IDS)/PTO-1499 Citations
- 12. ☐ Preliminary Amendment
- 13. ☒ Return Receipt Postcard (MPEP 503)
(should be specifically itemized)
- 14. ☐ Small Entity ☐ Statement filed in prior application,
Statement(s) Status still proper and desired
- 15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- 16. ☐ Other: _____

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: /**18. CORRESPONDENCE ADDRESS**☐ Customer Number of "Bar Code Label"Insert Customer No. or Attach bar
code label hereor ☒ Correspondence address below

NAME	William M. Lee, Jr. LEE, MANN, SMITH, McWILLIAMS, SWEENEY & OHLSON				
ADDRESS	P.O. BOX 2786				
CITY	Chicago	STATE	Illinois	ZIP CODE	60690-2786
COUNTRY	USA	Telephone	312-368-6620	FAX	312-368-0034

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="font-size: small; margin: 5px 0;">Note: Effective October 1, 1997. Patent fees are subject to annual revision.</p>	Complete if Known
TOTAL AMOUNT OF PAYMENT (\$) 790	Application Number
	Filing Date
	First Named Inventor Phillips
	Group Art Unit
	Examiner Name
Attorney Docket Number 476-1471	

<h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number 12-0913</p> <p>Deposit Account Name Lee, Mann, Smith</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <h3 style="text-align: center; margin: 10px 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px;"> <h4>1. FILING FEE</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101 790</td><td>201 395</td><td>Utility filing fee</td><td>790</td></tr> <tr><td>106 330</td><td>206 165</td><td>Design filing fee</td><td></td></tr> <tr><td>107 540</td><td>207 270</td><td>Plant filing fee</td><td></td></tr> <tr><td>108 790</td><td>208 395</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114 150</td><td>214 75</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <h4>2. CLAIMS</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent Claims</th> <th>Extra</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>8</td> <td>3</td> <td></td> <td>20</td> <td>0</td> <td>0</td> </tr> <tr> <td></td> <td></td> <td></td> <td>3</td> <td>0</td> <td>0</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>0</td> </tr> </tbody> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <h4>Large Entity Small Entity</h4> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103 22</td><td>203 11</td><td>Claims in excess of 20</td></tr> <tr><td>102 82</td><td>202 41</td><td>Independent claims in excess of 3</td></tr> <tr><td>104 270</td><td>204 135</td><td>Multiple dependent claim</td></tr> <tr><td>109 82</td><td>209 41</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110 22</td><td>210 11</td><td>Reissue claims in excess of 20 and over original patent</td></tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$) 0</td> </tr> </tbody> </table> </div> </div>	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101 790	201 395	Utility filing fee	790	106 330	206 165	Design filing fee		107 540	207 270	Plant filing fee		108 790	208 395	Reissue filing fee		114 150	214 75	Provisional filing fee		SUBTOTAL (1)			(\$)	Total Claims	Independent Claims	Multiple Dependent Claims	Extra	Fee from below	Fee Paid	8	3		20	0	0				3	0	0					0	0	Fee Code (\$)	Fee Code (\$)	Fee Description	103 22	203 11	Claims in excess of 20	102 82	202 41	Independent claims in excess of 3	104 270	204 135	Multiple dependent claim	109 82	209 41	Reissue independent claims over original patent	110 22	210 11	Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)		(\$) 0
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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	William M. Lee, Jr.			Reg. Number	26,395
Signature				Date	12/23/97
				Deposit Account User ID	

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receipt of the
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New Patent Application of:
Phillips

MOBILE COMMUNICATIONS NETWORK

1. Fee Transmittal Letter
2. Utility Patent Application Transmittal
3. Specification and Title Page
4. 4 Sheets of Drawings
5. Check No. 29159 for \$790.00
6. Certificate of EXPRESS MAIL.
7. Return Post Card.

DUE DATE (If Any): New Application

DATE SENT: December 23, 1997

jac

To follow:

1. Declaration and Power of Attorney (due 2/23/98)

"Express Mail" mailing label number

EM 394 992 314 US

Date of deposit: December 23, 1997

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Mattie M. Williams

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